The Society for Creative Anachronism, Inc.
Minor's Waiver and Informed Consent to Participate in SCA Combat

This waiver MUST be signed for you to receive an authorization card for field activities, but need not be re-executed when you authorize for additional field activities. However, it must be re-executed when your authorization card expires, and a new waiver filed with the Lists Office.

PRINT! SCA Name:______________________________________________________
PRINT! Legal Name:______________________________________________________
PRINT! Street:___________________________________________________________
PRINT! City:___________________________ STATE:_________ ZIP:_____________
PRINT! Parent's Legal Name:_______________________________________________
PRINT! Address, if different:_______________________________________________

I, being a legal adult and the parent/legal guardian of the above minor person, having read and understood the contents of this document, agree and consent to the provisions contained herein. It is the intention of the aforesaid minor person to participate in SCA combat-related activities (such as armored combat, period fencing, marshaling, combat archery, scouting and banner-bearing) at events sponsored by the Society for Creative Anachronism, Inc. I acknowledge that these activities are potentially dangerous and that I and the minor person voluntarily accept any risks involved. In consideration of the minor's being permitted to take part in these activities, I and the said minor agree to be bound by the rules of the Society for Creative Anachronism, Inc., and to obey the directions of the marshals and other governing officials of these activities. In the event of any disagreements or disputes arising from the minor's taking part in these activities, we agree to submit such disagreements or disputes to a board of arbitration appointed by the Society for Creative Anachronism, Inc., and to abide by any decisions reached by such board. I agree to release, hold harmless and keep indemnified the Society for Creative Anachronism, Inc., its organizers and agents, officials, servants and representatives from and against all claims, actions, costs, expenses and demands in respect to death, injury, loss or damage to the minor's person or property, howsoever caused, arising out of or in connection with taking part in these events, even if the same may have been contributed to or occasioned by the negligence of the said body or of any of its agents, officials, servants or representatives. It is understood and agreed that this agreement is to be binding on myself, upon the minor person, and upon my and their heirs, executors and assigns.

Parent's/Legal Guardian's signature:_______________________________________Date: _________________

I, the said minor person, have read and understand the contents of this document and agree and consent to the provisions contained herein.

Minor's signature:_____________________________________ Date: ________________
Witness:____________________________ Witness:_____________________________

Lists use only:  Expiration date:______________________

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STATE OF __________________________            COUNTY OF _____________________________
I, a Notary Public of the State and County aforesaid, do hereby certify that __________________________________ personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official stamp or seal, this the ___ day of ________, 20__

______________________________________                                  (notary seal)
Notary Public

My Commission Expires:

Form last updated by the Kingdom Lists office: 5/20/00